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Please type a plus sign (+) inside this box ☒ Approved for use through 10/31/2002. OMB 0851-0032
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| | | |
|--|------------------------|------------------------|
| UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b)) | Attorney Docket No. | |
| | First Inventor | John M. Fisher |
| | Title | Camp Cook Kit Strainer |
| | Express Mail Label No. | EL 8400 30081 |


| | |
|---|---|
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 |
|---|---|

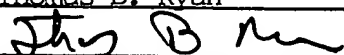
| | |
|--|--|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 14] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 11]</p> <p>5. Oath or Declaration with POA [Total Pages 1] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p> |
|--|--|

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

| | | | |
|--|-------------------------------------|---|---------------------------|
| <input type="checkbox"/> Continuation | <input type="checkbox"/> Divisional | <input type="checkbox"/> Continuation-in-part (CIP) | of prior application No.: |
| Prior application information: | | Examiner: | Group Art Unit: |
| For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | | |

19. CORRESPONDENCE ADDRESS

| | | | |
|---|---|----------|---|
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label |  | or | <input type="checkbox"/> Correspondence address below |
| Name | 29988 | | |
| PATENT & TRADEMARK OFFICE | | | |
| Address | | | |
| City | State | Zip Code | |
| Country | Telephone | Fax | |

| | | | |
|-------------------|---|-----------------------------------|-------------|
| Name (Print/Type) | Thomas B. Ryan | Registration No. (Attorney/Agent) | 31, 659 |
| Signature |  | Date | AUG 31 2001 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 355.00

Complete If Known

| | |
|----------------------|-----------------------|
| Application Number | Not yet assigned |
| Filing Date | Concurrently Herewith |
| First Named Inventor | John M. Fisher |
| Examiner Name | |
| Group Art Unit | |
| Attorney Docket No. | |

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number
Deposit Account Name

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | Small Entity | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|--------------|--------------|----------|----------|------------------------|----------|
| 101 | 201 | 710 | 355 | Utility filing fee | 355 |
| 106 | 206 | 320 | 160 | Design filing fee | |
| 107 | 207 | 490 | 245 | Plant filing fee | |
| 108 | 208 | 710 | 355 | Reissue filing fee | |
| 114 | 214 | 150 | 75 | Provisional filing fee | |

SUBTOTAL (1) (\$ 355

2. EXTRA CLAIM FEES

Total Claims - 20** = X =
Independent Claims - 3** = X =
Multiple Dependent =

| Large Entity | Small Entity | Fee Code | Fee (\$) | Fee Description |
|--------------|--------------|----------|----------|--|
| 103 | 203 | 18 | 9 | Claims in excess of 20 |
| 102 | 202 | 80 | 40 | Independent claims in excess of 3 |
| 104 | 204 | 270 | 135 | Multiple dependent claim, if not paid |
| 109 | 209 | 80 | 40 | ** Reissue independent claims over original patent |
| 110 | 210 | 18 | 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$ -0-

**for number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|--------------|--------------|----------|----------|--|----------|
| 105 | 205 | 130 | 65 | Surcharge - late filing fee or oath | |
| 127 | 227 | 50 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 139 | 130 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for <i>ex parte</i> reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 390 | 216 | 195 | Extension for reply within second month | |
| 117 | 890 | 217 | 445 | Extension for reply within third month | |
| 118 | 1,390 | 218 | 695 | Extension for reply within fourth month | |
| 128 | 1,890 | 228 | 945 | Extension for reply within fifth month | |
| 119 | 310 | 219 | 155 | Notice of Appeal | |
| 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | |
| 121 | 270 | 221 | 135 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,240 | 241 | 620 | Petition to revive - unintentional | |
| 142 | 1,240 | 242 | 620 | Utility issue fee (or reissue) | |
| 143 | 440 | 243 | 220 | Design issue fee | |
| 144 | 600 | 244 | 300 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(a) | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 148 | 710 | 246 | 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 710 | 279 | 355 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$

SUBMITTED BY

Name (Print/Type) Thomas B. Ryan

Registration No. 31,659

Complete (if applicable)

Telephone 716-232-7700

Signature

John M. Fisher

Date

AUG 21 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): John M. Fisher
APPLN. NO: Not Yet Assigned
FILED: Concurrently Herewith
TITLE: CAMP COOK KIT STRAINER

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REQUEST FOR NONPUBLICATION OF APPLICATION
UNDER 35 USC §122(b)
37 CFR §1.213(a)

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

This request is being submitted with this application on filing.

It is requested that this application **not** be published under 35 USC §122(b).

This is to certify that the invention disclosed in this application has not been and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at 18 months after filing.

Respectfully submitted,
EUGENE STEPHENS & ASSOCIATES



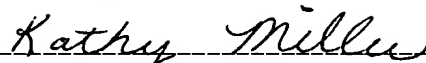
Thomas B. Ryan, Reg. No. 31,659
Agent for Applicant(s)
56 Windsor Street
Rochester, New York 14605
Phone: (716) 232-7700
Fax: (716) 232-7188
TBR:cba

Dated: 31 August 2001

"Express Mail" Label No. EL 840030081 US

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated below and is addressed to:
Assistant Commissioner for Patents, Washington, D.C., 20231.

Date of Deposit: 31 August 2001


Kathy Miller

09945285-083101